24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule F)

Schedule E)		PAGE 1 OF 5 FOR SE OF FORM 24/48
NAME OF COMMITTEE (In Full)		FEC IDENTIFICATION NUMBER ▼
Senate Majority PAC		C C00484642
Check if X 24-hour report 48-hour report New rep	port Amends report	filed on filed on
Full Name of Payee Ambrosino Muir Hansen Crounse		Date of Public Distribution/Dissemination
		10 26 7 2016
Mailing Address 500 Sansome St		Amount
Ste 201 City State	Zip Code	35990.00
San Francisco CA	94111-3215	Transaction ID : VN7GBA6HQ54 Date of Disbursement or Obligation
Purpose of Expenditure Direct Mail - Estimate	Category/ Type	M M M / D D / Y Y Y Y Y
Name of Federal Candidate	x Support C	Office Sought: House District:
Bayh, Evan, , ,	Oppose	President Senate State: IN
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary
Full Name of Payee		Date of Public Distribution/Dissemination
Chambers Lopez Strategies		10 / 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address PO Box 5539		Amount
City State	Zip Code	6866.52
Arlington VA	22205-0039	Transaction ID : VN7GBA6HQ21 Date of Disbursement or Obligation
Purpose of Expenditure Online Advertising - Estimate	Category/ Type	M M / D D / Y Y Y Y
Name of Federal Candidate	Support C	Office Sought: House District:
Heck, Joe, , ,	X Oppose	President Senate State: NV
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: Primary General 2016 Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures)	42856.52
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures with, or at the request or suggestion of, any candidate or authorized party committee) any political party committee or its agent.	•	• • • • • • • • • • • • • • • • • • • •
	nically Filed] Date	10 27 2016
Signature	'	